UNIVERSITY OF CALIFORNIA
MEDICAL SCHOOL

STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH
WALTER M. DICKIE, M. D., DIRECTOR

Weekly Bulletin

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EDITOR

State Health Work Cost Is Negligible.

The 48 states of the Union are spending only 22 cents per capita on public health and sanitation. Last year they spent $3.57 per capita for schools, $1.54 per capita for charities, hospitals and corrections and $1.35 per capita for highways. The low per capita cost of public health and sanitation is remarkable, considering the extensive health service that the states are rendering. Only 2.4 per cent of the expenses of state government are for the support of public health. Actually, the amounts spent for health work are much less, for, included in the figures, which are from the U. S. Census Bureau, are almost nine million dollars spent for the treatment of the tuberculous in state institutions and more than a million dollars spent in the regulation of professional occupations. Neither of these are true public health functions, but belong, rather, to institutional care and the maintenance of professional standards, respectively. California does not maintain any state institutions for the treatment of tuberculosis; the counties care for their own tuberculous, assisted by a small subsidy granted by the state.

The per capita expenditures for all state government and the percentages for each of the particular items of expense for the year 1926 are as follows:

	Per capita	*Per cent*
All general departments	$8.98	100.00
General government	.75	8.4
Protection to property and person	.52	5.8
Development and conservation of natural resources	.54	6.0
Health and sanitation	.22	2.4
Highways	1.35	15.1
Charities, hospitals and corrections	1.54	17.2
Schools	3.57	39.7
Libraries	.02	0.2
Recreation	.03	0.3
Miscellaneous	.44	4.9

Excluding the ten million dollars spent for the care of the tuberculous in state institutions and the regulation of professional standards, the per capita for health and sanitation is but 13.5 cents.

It is interesting to note that 72 per cent of all state governmental expenditures last year were for schools, highways, charities, hospitals and corrections. It is reasonable to make the assertion that if more money were spent in the prevention of disease the cost of state hospitals, charities and corrections might be reduced greatly. Moneys spent in the maintenance of schools and highways are well spent, and good schools and good highways undoubtedly have a certain bearing upon the maintenance of health.

The total amount spent by the 48 states, in 1926, for the conservation of health and sanitation was $25,549,229, but there is included in this amount $8,737,697 expended for the treatment of tuberculosis in state institutions, and $1,199,785 expended in the regulation of professional occupations, neither of which are regarded as true public health functions, since they have nothing to do with the prevention of disease. The exclusion of these two items makes the per capita for health and sanitation for all the states but 13.5 cents.

Excluding these amounts, the total spent by the states last year for health conservation was $15,609,747, segregated as follows:

Supervising departments	$2,430,488
Vital statistics	755,396
Tuberculosis, other than state care of cases	2,062,264
Prevention and treatment of communicable diseases	3,004,505
Conservation of child life	2,465,238
Food regulation and inspection	2,467,732
Other health and sanitation	2,424,124
Total	$15,609,747

The ratio of state funds expended for health and sanitation projects has remained almost constant since 1915. The variation has not amounted to more than three-tenths of 1 per cent, as the following table indicates:

Per Cent of State Expenditures (48 States) for Health and Sanitation, 1915-1926.

Year	*Per cent*
1915	2.4
1917	2.6
1919	2.7
1922	2.4
1924	2.3
1925	2.4
1926	2.4

Relatively the expense of state public health administration is the same for 1926 that it was in 1915. In spite of this fact, there has been extensive development in all lines of public health work and vastly more is now being done in the interests of public welfare than ever before in the history of the United States.

The 48 states, last year, spent more for the protection of fish and game than they did for the prevention of disease in human beings. They spent more for forestry work than they did for the conservation of child life and they spent almost as much for live stock conservation as they did for all public health and sanitation work. The figures follow:

States' Expenditures for Departmental Work, 1926.

Live stock	$14,105,774
Forestry	2,715,473
Fish and game	5,199,644
Total	$22,020,891

Conservation of child life	$2,465,238
Prevention of communicable diseases	3,004,505
Prevention of tuberculosis	2,062,264
Total	$7,532,007

State Brings Relief To Crippled Children.

A large number of crippled children, who otherwise could not be operated on for lack of funds, will come under treatment at the expense of the various counties of the state through the provisions of the Crippled Child Act of the last legislature. Perhaps the most outstanding among such cases are paralyses following acute epidemic poliomyelitis (infantile paralysis), epidemic meningitis and encephalitis. Tuberculosis of the bones, rickets, arthritis and congenital deformities will also bring large numbers of children under medical care.

Remarkable results are obtained, under modern methods, in the treatment of tuberculosis of the bones. The truth of this statement is evident to any one who will consider the relatively few children suffering from curvature of the spine who are now seen. It is not necessary to remember very many years back when "hunchback" children could be seen almost any day on the streets and in the schools. How long has it been since you last saw a child with a "hunchback?" Children with club feet and other deformities have become equally scarce.

Rickets is more common in California than is generally believed. To be sure, this disease does not begin to be the problem here that it is in most thickly populated cities of other states where little sunshine penetrates the gloom of the tenement house districts. Lack of sunshine, alone, does not cause rickets, however; lack of proper foods is also an important factor in the development of this unnecessary disease and there are many children in California who do not get proper foods. This is due to ignorance of the parents, in most cases, and not to poverty. It is a wise parent who knows how and what to feed a child.

Sunshine, both natural and artificial, remains the best available treatment for rickets, in combination with proper foods, medical supervision, and a regulated program of hygienic living. Incidentally, it may be mentioned that children in the motion picture industry do not have rickets, for the powerful Kleig lights used in the studios are almost like sunshine in their property to prevent rickets. If every child were a motion picture actor there would be few or no cases of rickets.

Among other cases of disease that will be provided for under the Crippled Child Act are spastic paralysis, obstetrical paralysis, fractures, osteomyelitis (inflammation of bone marrow), muscular dystrophy (wasting of the muscles) and many other disabilities. The benefits to be derived through the working of the act may not be confined to this sort of cases, however. Under the provisions of the law, the counties may give surgical operations and treatments for any type of physical handicap in needy children who are under eighteen years of age.

The State Department of Public Health, under the law, is enabled to provide immediate relief to any needy crippled child. It is necessary for the parents or guardian of any such child to go before a superior judge in the county where they may reside and obtain a certificate stating the facts with regard to the case. This certificate is then sent to the State Department of Public Health at Sacramento and the Supervisor of Crippled Children will take action, at once, to bring the crippled child under treatment. The expense of treatment is ultimately paid by the county of which the child is a resident. This act is one of the most beneficient ever written upon the California statutes and it will go far toward making useful citizens of thousands of handicapped children who would otherwise be crippled for life, burdensome to their families and to the state.

NO!

That is the answer to each of the following twenty-five questions:

1. Does smallpox vaccination cause syphilis?

2. Does closing the public schools stop the spread of communicable diseases?

3. Is there any sound reason why 31,286 cases of smallpox should occur in California during the past seven years?

4. Is it wise to wilfully expose children to communicable diseases in order that they may "catch them and have them over with?"

5. Is it necessary to remove food from a can immediately after it is opened in order to keep it from spoiling?

6. Is there any other single article of food that is of greater value to children than pure cow's milk?

7. Is there any better food for a baby than its mother's milk?

8. Is malaria known to be contracted by means of any agency other than the female anopheles mosquito?

9. Will the use of a toothbrush, alone, prevent teeth from decaying?

10. Is there any known pest that is more destructive to property and which, at the same time, constitutes a greater menace to health than the rat?

11. Do septic tanks destroy all disease-causing bacteria in sewage?

12. Do running streams purify themselves?

13. Is any clear, sparkling water, without odor, a safe water to drink?

14. Are the numbers of deaths from cancer and heart disease decreasing each year?

15. Is whooping cough a disease which seldom causes death and which, following recovery, leaves no bad after-effects?

16. Is it safe to remain in a closed garage while the motor in an automobile is running?

17. Is fumigation of any value in the destruction of disease germs?

18. Does epidemic poliomyelitis cause paralysis in all persons whom it attacks?

19. Is there any excuse for delay in giving a child antitoxin if he has contracted diphtheria?

20. Will climate alone cure tuberculosis?

21. Is there anything that is of greater value in preventing diphtheria than the administration of toxin antitoxin?

22. Are there any disinfectants known to be more efficient in the destruction of harmful bacteria than soap and water, sunshine and fresh air?

23. Is hydrophobia (rabies) more prevalent during the so-called "dog-days" of August?

24. Do bad odors, such as those which come from decaying garbage and refuse, cause disease?

25. Is there anything of greater importance for the prosperity and welfare of the people than the efficient safeguarding of their health?

MORBIDITY.*

Diphtheria.

183 cases of diphtheria have been reported, as follows: Berkeley 4, Oakland 23, Contra Costa County 1, Fresno County 3, Los Angeles County 9, Alhambra 1, Burbank 1, Los Angeles 46, Pomona 1, San Fernando 1, Hawthorne 1, West Covina 2, Madera County 1, Napa 3, Orange County 4, Orange 1, Santa Ana 2, Riverside County 7, Riverside 1, Sacramento 4, San Bernardino County 12, San Diego County 3, Escondido 2, San Diego 2, San Francisco 23, Stockton 4, Redwood

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* From reports received on November 21st and 22d for the week ending November 19th.

City 6, Santa Barbara County 1, Santa Barbara 3, Santa Clara County 1, Palo Alto 3, San Jose 1, Benicia 1, Stanislaus County 3, Tulare County 1, Exeter 1.

Scarlet Fever.

169 cases of scarlet fever have been reported, as follows: Alameda 1, Berkeley 2, Oakland 36, Fresno County 6, Bakersfield 1, Kings County 4, Los Angeles County 15, Alhambra 2, Azusa 1, Covina 1, Hermosa Beach 1, Long Beach 5, Los Angeles 17, Pasadena 1, Redondo Beach 2, Whittier 1, South Gate 1, Monterey Park 1, Maywood 1, Sausalito 4, Anaheim 1, Rverside County 1, Riverside 2, Sacramento 3, San Benito County 1, Hollister 2, San Bernardino County 1, San Bernardino 2, Coronado 1, San Diego 11, San Francisco 16, Stockton 3, Paso Robles 4, Daly City 1, Redwood City 1, Santa Clara County 4, Gilroy 1, Palo Alto 4, San Jose 4, Benicia 1, Turlock 1, Marysville 1.

Measles.

66 cases of measles have been reported, as follows: Alameda 1, Berkeley 2, Oakland 1, Los Angeles 7, Pomona 2, Salinas 1, Sacramento 2, San Diego County 7, Escondido 3, Oceanside 1, San Diego 1, San Francisco 10, San Joaquin County 2, San Luis Obispo County 7, San Luis Obispo 3, Santa Barbara County 1, Palo Alto 1, Santa Cruz County 1, Tulare County 1, Yolo County 4, Los Angeles County 8.

Smallpox.

8 cases of smallpox have been reported, as follows: Alameda 1, Oakland 1, Sacramento 4, San Francisco 1, Watsonville 1.

Typhoid Fever.

15 cases of typhoid fever have been reported, as follows: Alameda 1, Amador County 1, Contra Costa County 1, Los Angeles County 1, El Segundo 1, Napa County 6, San Diego County 1, San Francisco 1, San Joaquin County 1, Santa Clara County 1.

Whooping Cough.

70 cases of whooping cough have been reported, as follows: Alameda 1, Berkeley 3, Oakland 7, Amador County 1, Los Angeles County 2, Long Beach 1, Los Angeles 7, Pasadena 2, Monterey County 7, Orange County 3, Oceanside 2, San Diego 28, Santa Cruz County 3, Oxnard 3.

Meningitis (Epidemic).

7 cases of meningitis have been reported, as follows: Los Angeles City 4, Sacramento County 1, San Francisco 1, San Joaquin County 1.

Encephalitis (Epidemic).

2 cases of encephalitis have been reported, as follows: Los Angeles 1, San Francisco 1.

Poliomyelitis.

26 cases of poliomyelitis have been reported, as follows: Oakland 2, Amador County 1, Colusa 1, Richmond 1, Los Angeles County 1, Beverly Hills 1, Huntington Park 1, Los Angeles 2, Monrovia 1, Pomona 1, Orange 1, Sacramento 2, San Diego 1, San Francisco 5, San Joaquin County 1, Shasta County 3, Wheatland 1.

COMMUNICABLE DISEASE REPORTS.

Disease	1927				1926			
	Week ending			Reports for week ending Nov. 19 received by Nov. 22	Week ending			Reports for week ending Nov. 20 received by Nov. 23
	Oct. 29	Nov. 5	Nov. 12		Oct. 30	Nov. 6	Nov. 13	
Anthrax	0	0	0	0	0	0	0	0
Botulism	0	0	0	0	0	0	0	0
Chickenpox	251	199	251	305	177	215	256	308
Diphtheria	122	136	139	183	150	161	164	189
Dysentery (Bacillary)	2	0	0	5	1	1	0	0
Encephalitis (Epidemic)	5	1	1	2	4	1	1	0
Gonococcus Infection	116	127	139	106	106	133	85	116
Influenza	18	18	15	11	21	13	21	17
Jaundice (Epidemic)	0	0	0	0	4	0	2	0
Leprosy	1	0	0	0	0	0	0	0
Malaria	0	0	4	3	2	2	3	0
Measles	57	53	66	66	588	655	655	776
Meningitis (Epidemic)	5	6	5	7	5	5	1	0
Mumps	59	71	56	72	101	174	139	207
Paratyphoid Fever	1	1	0	0	1	0	0	0
Pneumonia (Lobar)	67	33	27	36	57	25	36	54
Poliomyelitis	40	35	32	26	1	5	2	6
Rabies (Animal)	3	4	8	10	8	10	13	10
Rocky Mt. Spotted Fever	0	0	0	0	0	0	0	0
Scarlet Fever	134	147	121	169	211	221	291	296
Smallpox	3	7	7	8	14	13	46	12
Syphilis	127	136	197	103	136	207	84	119
Tetanus	0	0	2	0	4	0	2	1
Trachoma	6	206	3	1	4	2	4	6
Trichinosis	0	0	0	0	0	0	0	0
Tuberculosis	180	193	192	193	184	213	165	165
Typhoid Fever	9	10	9	15	19	18	19	13
Typhus Fever	0	0	0	0	0	0	0	0
Whooping Cough	110	80	114	70	57	71	79	97
Totals	1316	[illegible]	1388	1391	1855	2145	2068	2392

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